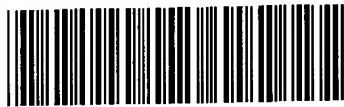



Issue Classification 	Application No.	Applicant(s)	
	09/543,407	WHITE ET AL.	
	Examiner	Art Unit	
	Vanessa L. Ford	1645	

ISSUE CLASSIFICATION									
ORIGINAL					CROSS REFERENCE(S)				
CLASS		SUBCLASS			CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)			
536		23.7			536	23.1	23.4		
INTERNATIONAL CLASSIFICATION					424	184.1	192.1	199.1	
C	0	7	H	21/04	530	587.3			
C	0	7	H	21/00					
A	6	1	K	39/00					
A	6	1	K	39/12					
C	1	2	P	21/08					
Vanessa L. Ford 08/18/2004 (Assistant Examiner) (Date)					LYNETTE R. F. SMITH SUPERVISORY PATENT EXAMINER TECHNOLOGY CENTER 1000 (Primary Examiner) (Date) <i>L. R. F. Smith</i> 8/19/04			Total Claims Allowed: 9	
W. P. [Signature] 8-25-04 (Legal Instruments Examiner) (Date)								O.G. Print Claim(s) 1	

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
	1		31		61		121		181
	2		32		62		122		182
	3		33		63		123		183
	4		34		64		124		184
	5		35	5	65		125		185
	6		36	6	66		126		186
	7		37	7	67		127		187
	8		38	8	68		128		188
	9		39		69		129		189
	10		40		70		130		190
	11		41		71		131		191
	12		42		72		132		192
	13		43		73		133		193
	14		44	9	74		134		194
	15		45		75		135		195
	16		46		76		136		196
	17		47		77		137		197
	18		48		78		138		198
	19		49		79		139		199
	20		50		80		140		200
	21		51		81		141		201
	22		52		82		142		202
	23		53		83		143		203
	24		54		84		144		204
	25		55		85		145		205
	26	1	56		86		146		206
	27	2	57		87		147		207
	28	23	58		88		148		208
	29	4	59		89		149		209
	30		60		90		150		210

Issue Classification 	Application No.	Applicant(s)	
	09/543,407	WHITE ET AL.	
	Examiner	Art Unit	
	Vanessa L. Ford	1645	

ISSUE CLASSIFICATION												
ORIGINAL					CROSS REFERENCE(S)							
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536		23.7			536	23.1	23.4					
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A	6	1	K	39/00								
A	6	1	K	39/12								
C	1	2	P	21/08								
Vanessa L. Ford 08/18/2004 (Assistant Examiner) (Date)									Total Claims Allowed:			
(Legal Instruments Examiner) (Date)									O.G. Print Claim(s) 1		O.G. Print Fig. NONE	
					(Primary Examiner) (Date)							

<input checked="" type="checkbox"/> Claims renumbered in the same order as presented by applicant				<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
Final	Original	Final	Original	Final	Original	Final	Original	Final	Original
	1		31		61		121		181
	2		32		62		122		182
	3		33		63		123		183
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	5		35	5	65		125		185
	6		36	6	66		126		186
	7		37	7	67		127		187
	8		38	8	68		128		188
	9		39		69		129		189
	10		40		70		130		190
	11		41		71		131		191
	12		42		72		132		192
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	14		44	9	74		134		194
	15		45		75		135		195
	16		46		76		136		196
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	18		48		78		138		198
	19		49		79		139		199
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	21		51		81		141		201
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	23		53		83		143		203
	24		54		84		144		204
	25		55		85		145		205
	26	1	56		86		146		206
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	28	3	58		88		148		208
	29	4	59		89		149		209
	30		60		90		150		210